

AMERICAN COLLEGE of CARDIOLOGY



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April 17, 1996

APR 18 1996

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William F. Caton, Acting Secretary
Office of the Secretary
Federal Communications Commission
1919 M Street, N.W. Room 222
Washington, D.C. 20554

FEDERAL COMMUNICATIONS COMMISSION
OFFICE OF SECRETARY

SUBJECT: ET Docket No. 95-177
Amendment of Part 15 of the Commission's Rule
to Permit Operation of Biomedical Telemetry Devices
on VHF TV Channels 7-13 and on UHF TV Channels

Dear Mr. Caton:

Please accept the College's comments on ET Docket No. 96-177. We apologize for the delay. Five copies will be mailed. If you have any questions please contact me at (301) 897-2692.

Sincerely,

Fay A. Fulton
Assistant Director

Attachment

cc: Karen J. Collishaw

ff:75835

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April 15, 1996

APR 18 1996

William F. Caton, Acting Secretary
Office of the Secretary
Federal Communications Commission
1919 M Street, N.W. Room 222
Washington, D.C. 20554

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OFFICE OF SECRETARY

SUBJECT: ET Docket No. 95-177
Amendment of Part 15 of the Commission's Rule
to Permit Operation of Biomedical Telemetry Devices
on VHF TV Channels 7-13 and on UHF TV Channels

Dear Mr. Caton:

The American College of Cardiology is a 23,000 member nonprofit medical society and teaching institution, dedicated to fostering optimal cardiovascular care and disease prevention through professional education, promotion of research, and leadership in the development of standards and formulation of health policy. The College would like to encourage the Federal Communications Commission (FCC) to finalize its rule to establish clear channels for ECG telemetry monitoring.

Telemetry devices permit patients the freedom to move about in a limited area while being continually monitored, speeding patients' recovery, shortening length of stay and reducing health care costs. The current TV frequency bands that are being used are becoming so crowded with high power commercial transmissions that, combined with the low levels of power to which the medical telemetry industry has been restricted, industry cannot be certain that the signals will reach the receiving antennas at all, much less without corruption. Such interference may temporarily prevent monitors from receiving ECG and other vital information, which could cause an important cardiac event to be missed or require hospital staff to check on the patient each time the signal is lost.

The College urges the FCC's prompt finalization of this proposed rule.

Sincerely,

W. Bruce Fye, M.D.

W. Bruce Fye, M.D., F.A.C.C.
Chair, Government Relations Committee

cc: Richard P. Lewis, M.D., F.A.C.C.
James B. Seward, M.D., F.A.C.C.
David J. Feild

FF:75538:mb

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